

# DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

Attorney Docket No. 9204-7

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled METHODS, SYSTEMS, AND COMPUTER PROGRAM PRODUCTS FOR CONTROLLING DEVICES THROUGH A NETWORK VIA A NETWORK TRANSLATION DEVICE,

the specification of which

☒ is attached hereto

OR

☐ was filed on \_\_\_\_\_ as United States Application No. or PCT International Application Number \_\_\_\_\_ and was amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

None			<input type="checkbox"/> Yes <input type="checkbox"/> No
Number	Country	MM/DD/YYYY Filed	Priority Claimed
			<input type="checkbox"/> Yes <input type="checkbox"/> No
Number	Country	MM/DD/YYYY Filed	Priority Claimed

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below.

60/258,658	12/29/2000
Application Number(s)	Filing Date (MM/DD/YYYY)
Application Number(s)	Filing Date (MM/DD/YYYY)

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or § 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application (37 C.F.R. § 1.63(d)).

None		
Appln. Serial No.	Filing Date	Status Patented/Pending/Abandoned
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following registered attorney(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

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Variable	Mean	Standard deviation	Minimum	Maximum
Age	34.5	10.5	20	55
Gender	Male	Female		
Marital status	Married	Single		
Education	High school	College		
Occupation	Manager	Worker		
Income	\$10,000	\$20,000		
Health status	Good	Poor		
Exercise frequency	Weekly	Monthly		
Stress level	Low	High		
Sleep quality	Good	Poor		
Dietary habits	Healthy	Unhealthy		
Alcohol consumption	None	Occasional		
Tobacco use	Non-smoker	Smoker		
Family size	2	3		
Work hours	40	50		
Commuting time	30	45		
Home ownership	Renter	Owner		
Neighborhood safety	Safe	Unsafe		
Access to green spaces	Yes	No		
Proximity to public transit	Close	Far		
Local economy	Strong	Weak		
Community engagement	High	Low		
Local government responsiveness	High	Low		
Local infrastructure quality	Good	Poor		
Local environmental quality	Good	Poor		
Local social cohesion	High	Low		
Local cultural diversity	High	Low		
Local economic diversity	High	Low		
Local political participation	High	Low		
Local social capital	High	Low		
Local trust in institutions	High	Low		
Local civic engagement	High	Low		
Local community resilience	High	Low		
Local social support networks	High	Low		
Local mental health resources	High	Low		
Local physical health resources	High	Low		
Local educational resources	High	Low		
Local cultural resources	High	Low		
Local economic resources	High	Low		
Local political resources	High	Low		
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